## SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) for each category of the Detailed Summary Page

1 0	IT LINE NOWIDEN. TAGE 21 OF OF								
(check only one)									
>	<b>X</b> 11a	11b		11c		12			
	13	14		15		16		17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) ORTHOCAROLINA PA FEDI	ERAL PAC			
Full Name (Last, First, Middle Initial) Thomas McCoy  Mailing Address 431 Fenton Place		Date of Receipt		
City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer OrthoCarolina, PA Receipt For:  Primary General Other (specify)	State Zip Code NC 28207  C  Occupation Physician  Aggregate Year-to-Date ▼  290.90	Transaction ID: SA11AI.7556  Amount of Each Receipt this Period  100.00  05/14/2015		
Full Name (Last, First, Middle Initial)  Thomas McCoy  Mailing Address 431 Fenton Place  City Charlotte  FEC ID number of contributing federal political committee.	State Zip Code NC 28207	Date of Receipt    M		
Name of Employer OrthoCarolina, PA  Receipt For:  Primary General Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  390.90	- 06/23/2015		
Full Name (Last, First, Middle Initial)  James P. McDonald  Mailing Address 122 Hickory Hill Road  City  Mooresville  FEC ID number of contributing federal political committee.  Name of Employer  OrthoCarolina  Receipt For:  Primary  General  Other (specify)	State Zip Code NC 28117  C  Occupation Physician  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M M / 22 2015  Transaction ID : SA11AI.7524  Amount of Each Receipt this Period  1000.00  04/22/2015		
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	1200.00		
TOTAL This Period (last page this line number	per only)			